Image# 201507319000477603 PAGE 1 / 47

FEC FORM 3Y

REPORT OF RECEIPTS AND DISBURSEMENTS

TORIW 3X	For Other Than An A	Authorized Committe	ee		Office Use Only	
1. NAME OF	TYPE OR PRINT ▼	Example: If typir	na. type	1000	Cindo Cac Only	
COMMITTEE (in full)	,	over the lines.	ig, typo	12FE4M5		
HCR MANOR CARE	PAC					1
ADDRESS (number and street)	333 NORTH SUMMIT S	STREET				
Check if different	16TH FLOOR					
than previously reported. (ACC)	TOLEDO			OH	43604	-
2. FEC IDENTIFICATION N	UMBER ▼	CITY 🛦	S	STATE 🛦	ZIP CO	DE 🛦
C C00260141	3		IEW N) OR	AM (A)	IENDED	
4. TYPE OF REPORT	(b) Monthly	Feb 20 (M2)	May 20 (M5)	Aug	20 (M8)	Nov 20 (M11) (Non-Election
(Choose One)	Report Due On:	Mar 20 (M3)	lun 20 (M6)	Sep	20 (M9)	Year Only) Dec 20 (M12) (Non-Election
(a) Quarterly Reports:			, ,			Year Only)
April 15 Quarterly Report (Apr 20 (M4)	Jul 20 (M7)	Oct 2	20 (M10)	Jan 31 (YE)
July 15	(c) 12-Day	Primary (12P)	General	(12G)	Runoff (12R)
Quarterly Report (October 15	(Q2) Report for the		12C)	Special (12S)	
Quarterly Report (Q3)	M M /	D D /	Y . Y . Y . Y	in the	
January 31 Year-End Report (YE)	ection on			State o	of
July 31 Mid-Year Report (Non-electi Year Only) (MY)	on (d) 30-Day POST-Electio Report for the	· ·	i)	Runoff (3	0R)	Special (30S)
Termination Repor (TER)	t	M - M /	D D /	Y = Y = Y	in the	
(1211)	Ele	ection on			State o	of
5. Covering Period 0	01 20	15 through	06	/ D D /	2015	
I certify that I have examined t	his Report and to the bes	st of my knowledge and b	pelief it is true	e, correct and	complete.	
Type or Print Name of Treasur	er Mr. Kevin Jackson					
				M	/ D D /	Y Y Y Y
Signature of Treasurer Mr.	Kevin Jackson	[Electronically	Filed] D	ate 07	31	2015
NOTE: Submission of false, error	neous, or incomplete inform	nation may subject the pers	son signing th	is Report to th	ne penalties of 2 I	U.S.C. §437g.
Office					FEC FOR	M 3X
Use Only					Rev. 12/2	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name HCR MANOR CARE PAC 01 2015 06 30 2015 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 16391.18 January 1, 2015 (b) Cash on Hand at 16391.18 Beginning of Reporting Period..... 82424.84 82424.84 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 98816.02 98816.02 6(a) and 6(c) for Column B)..... 81424.85 81424.85 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 17391.17 17391.17 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

HCR MANOR CARE PAC

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	05004.00	65931.28
(i) Itemized (use Schedule A)	65931.28	03931.20
(**) 11 - 7 1 - 1	40525.00	10525.89
(ii) Unitemized	10525.89	10323.09
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	76457.17	76457.17
Lines Tr(a)(i) and (ii)	, , , , , , , , , , , , , , , , , , , ,	7
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)▶	76457.17	76457.17
. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
. All Loans Received	0.00	0.00
Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures	7	7
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made	,	,
to Federal Candidates and Other		
Political Committees	5966.50	5966.50
Other Federal Receipts		
(Dividends, Interest, etc.)	1.17	1.17
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(IIOIII Ochedule 110)	0.00	, 0.00
(h) Lovin Funda (from Cahadula LIF)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
Total Receipts (add Lines 11(d),	0.00	
12, 13, 14, 15, 16, 17, and 18(c))▶	82424.84	82424.8
. Total Federal Receipts	00404.04	00404.0
(subtract Line 18(c) from Line 19)▶	82424.84	82424.84

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	II. Disbursements COLUMN A Total This Period					
Operating Expenditures:	Total Tills I cilou	Calendar Year-to-Date				
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)						
(i) Federal Share	0.00	0.00				
	0.00	0.00				
(ii) Non-Federal Share	0.00	0.00				
(b) Other Federal Operating Expenditures	174.85	174.85				
(c) Total Operating Expenditures	174.00	174.00				
(add 21(a)(i), (a)(ii), and (b))▶	174.85	174.85				
Transfers to Affiliated/Other Party	7					
Committees	0.00	0.00				
Contributions to Federal Candidates/Committees						
and Other Political Committees	64000.00	64000.00				
Independent Expenditures	0.00	0.00				
(use Schedule E) Coordinated Party Expenditures	0.00	0.00				
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00				
(use scriedule i)		0.00				
Loan Repayments Made	0.00	0.00				
Loans Made	0.00	0.00				
Refunds of Contributions To: (a) Individuals/Persons Other						
Than Political Committees	0.00	0.00				
	0.00	0.00				
(b) Political Party Committees	0.00	0.00				
(c) Other Political Committees	0.00	0.00				
(such as PACs)	0.00					
(d) Total Contribution Refunds						
(add Lines 28(a), (b), and (c))▶	0.00	0.00				
=						
Other Disbursements	17250.00	17250.00				
Federal Election Activity (2 U.S.C. §431(20))						
(a) Allocated Federal Election Activity						
(from Schedule H6) (i) Federal Share	0.00	0.00				
(I) Federal Shale						
(ii) "Levin" Share	0.00	0.00				
(b) Federal Election Activity Paid Entirely						
With Federal Funds	0.00	0.00				
(c) Total Federal Election Activity (add						
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00				
-						
Total Disbursements (add Lines 21(c), 22,	211212					
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	81424.85	81424.85				
Total Federal Disbursements						
(subtract Line 21(a)(ii) and Line 30(a)(ii)						
from Line 31)	81424.85	81424.85				
	7					

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	76457.17	76457.17
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	76457.17	76457.17
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	174.85	174.85
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	174.85	174.85

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE	NUMBER	:	PAGE	-	6	OF	47
(check only	one)						
X 11a	11b		11c		12		
13	14		15		16		17

Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC		
Full Name (Last, First, Middle Initial) Martin D Allen Mailing Address 7151 Whispering Oak		Date of Receipt
City	State Zip Code	06 30 2015 Transaction ID : SA11AI.39454
Sylvania	OH 43560	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2115.41
Name of Employer HCR ManorCare Inc.	Occupation AVP / Dir Internal Aud & Risk	Payroll Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2115.41	
Full Name (Last, First, Middle Initial) 3. Jeffrey R Amann Mailing Address 5100 Newton Ave. South		Date of Receipt
City Minneapolis	State Zip Code MN 55419	06 30 2015 Transaction ID : SA11Al.39455 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	455.00
Name of Employer HCR ManorCare	Occupation Regional Director of Operation	Payroll Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 455.00	
Full Name (Last, First, Middle Initial) . Nancy Ayers		Date of Receipt
Mailing Address 5184 N Quail Crest Dr		06 30 2015
City Grand Rapids	State Zip Code MI 49546	Transaction ID : SA11AI.39461 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	480.00
Name of Employer HCR Manor Care	Occupation Administrator	Payroll Contribution
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 480.00	
SUBTOTAL of Receipts This Page (optional)		3050.41
TOTAL This Period (last page this line number	only)	

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: **PAGE** 7 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

47

ITEMIZED RECEIPTS for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Nancy Baggett Date of Receipt Mailing Address 34327 Jared Ct 30 2015 06 City Zip Code State Transaction ID: SA11AI.39463 Chesterfield MI 48047 Amount of Each Receipt this Period FEC ID number of contributing C 216.00 federal political committee. **Payroll Contribution** Name of Employer Occupation Administrator HCR ManorCare Receipt For: Aggregate Year-to-Date ▼ Primary General 216.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Jocelyn D. Barnes Date of Receipt Mailing Address 6616 Cedar Grove Drive 06 30 2015 City State Zip Code Transaction ID: SA11AI.39464 North Richland Hills TX 76180 Amount of Each Receipt this Period FEC ID number of contributing 600.00 federal political committee. Payroll Contribution Name of Employer Occupation HCR.ManorCare, Inc. Regional Director of Operations Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Lynne M Bauerschmidt Date of Receipt Mailing Address 7060 Middlebury 30 06 2015 City State Zip Code Transaction ID: SA11AI.39467 MI Lambertville 48144 Amount of Each Receipt this Period

С

Occupation

Internal Training Lead

Aggregate Year-to-Date ▼

360.00

1176.00 - 9

Payroll Contribution

FEC ID number of contributing

General

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

federal political committee.

Other (specify)

Name of Employer

Receipt For:

HCR ManorCare Inc.

Primary

360.00

Use separate schedule(s) for each category of the Detailed Summary Page

	LINE			PAGE 8 OF 47					
(che	ck only	or	ne)						
X	11a		11b		11c		12	2	
	13		14		15		16	6	17

Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC		
Full Name (Last, First, Middle Initial) A. Ms Julie Beckert Mailing Address 3911 Buell		Date of Receipt
City Toledo FEC ID number of contributing federal political committee.	State Zip Code OH 43613	06 30 2015 Transaction ID: SA11AI.39469 Amount of Each Receipt this Period 525.00
Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify) ▼	Occupation Director of Marketing Aggregate Year-to-Date ▼ 525.00	Payroll Contribution
Full Name (Last, First, Middle Initial) Richard Black Mailing Address 2409 Drummond Rd City Toledo FEC ID number of contributing federal political committee. Name of Employer	State Zip Code OH 43616 C Occupation	Date of Receipt 06 17 2015 Transaction ID: SA11AI.39450 Amount of Each Receipt this Period 250.00 Contribution
HCR ManorCare Receipt For: □ Primary □ General Other (specify) ▼	Corporate Rehab Consultant Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) David Burke Mailing Address 425 Kingwood Rd City Linthicum Heights FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	State Zip Code MD 21090 C Occupation Administrator Aggregate Year-to-Date ▼	Date of Receipt 06 30 2015 Transaction ID : SA11AI.39483 Amount of Each Receipt this Period 423.10 Payroll Contribution
SUBTOTAL of Receipts This Page (optional)	•	1198.10
TOTAL This Period (last page this line number	only)	

SCHEDULE A (FEC Form 3X) IT

FOR LINE NUMBER: PAGE 9 OF Use separate schedule(s) (check only one)

EMIZED RECEIPTS	for each category of the Detailed Summary Page	`	11a 13	,	11b	11c	12 16	17
ny information copied from such Reports and Statements mar for commercial purposes, other than using the name and a	, , , , , , , , , , , , , , , , , , , ,					_		

or for commercial purposes, other than units NAME OF COMMITTEE (In Full)	using the name and address of any political committee t	to solicit contributions from such committee.
HCR MANOR CARE PAC		
Full Name (Last, First, Middle Initial) Candace Burks-McCoy		Date of Receipt
Mailing Address 601 N. Shore Dr		06 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.39484
Cisco	TX 76437	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	Payroll Contribution
HCR.ManorCare, Inc.	Senior Manager Clinical Services	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General	00 0	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Ms. Cecilia Credille		Date of Receipt
Mailing Address 534 Hevern Drive		05 06 2015 _
City	State Zip Code	U5 U6 2015 Transaction ID : SA11AI.39402
Wheaton	IL 60187	Amount of Each Receipt this Period
FEC ID number of contributing		1
federal political committee.	C	700.00
Name of Employer	Occupation	-
HCR.ManorCare, Inc.	Regional Director of Operations	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	00 0	
Other (specify) ▼	700.00	
Full Name (Last, First, Middle Initial) . Denise F Curry	<u> </u>	Date of Receipt
Mailing Address 503 Vilsack Road		06 30 2015
City	State Zip Code	Transaction ID : SA11AI.39491
Allegheny	PA 15116	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	507.68
Name of Employer	Occupation	Payroll Contribution
HCR. Manor Care, Inc	Manager	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	507.68	
CURTOTAL of Descire This D. ()	ional)	1457.68
SUBTUTAL OF RECEIPTS This Page (opti	ional)	1101.00
TOTAL This Period (last page this line	number only)	
(1-3-	***	The state of the s

FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Lynn Dvorak Date of Receipt Mailing Address 6071 S Overlook 2015 29 City Zip Code State Transaction ID: SA11AI.39428 MO Springfield 65810-1945 Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Contribution Name of Employer Occupation Regional Director of Operations HCR ManorCare Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Linda J Emmett Date of Receipt Mailing Address 10408 Meadowlark Ct. East 06 30 2015 City State Zip Code Transaction ID: SA11AI.39506 WA Bonney Lake 98391 Amount of Each Receipt this Period FEC ID number of contributing 950.00 federal political committee. Payroll Contribution Name of Employer Occupation HCR ManorCare Inc. Regional Director of Operations Receipt For: Aggregate Year-to-Date ▼ Primary General 950.00 Other (specify) Full Name (Last, First, Middle Initial) c. Lisa Evans Date of Receipt Mailing Address 24013 22nd Ave West M = M 30 06 2015 City Zip Code State Transaction ID: SA11AI.39507 WA Bothell 98021 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. **Payroll Contribution** Name of Employer Occupation **HCR Manor Care** Administrator Receipt For: Aggregate Year-to-Date ▼

250.00

L		,		7		0.00	
		3	-	7	-	(H)	

Primary

Other (specify)

General

SUBTOTAL of Receipts This Page (optional).....

FOR LINE NUMBER: PAGE 11 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) R Michael Ferguson Date of Receipt Mailing Address 2450 Underhill Rd 30 2015 06 City Zip Code State Transaction ID: SA11AI.39508 OH Toledo 43615 Amount of Each Receipt this Period FEC ID number of contributing C 1048.05 federal political committee. **Payroll Contribution** Name of Employer Occupation VP & Dir of Purchasing HCR ManorCare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 1048.05 Other (specify) Full Name (Last, First, Middle Initial) B. George Frill Date of Receipt Mailing Address 2006 Hale Ct 06 30 2015 City State Zip Code Transaction ID: SA11AI.39512 PA Wyomiseing 19610 Amount of Each Receipt this Period FEC ID number of contributing 240.80 federal political committee. Payroll Contribution Name of Employer Occupation HCR Manor Care, Inc. Administrator - Laureldale Receipt For: Aggregate Year-to-Date ▼ Primary General 240.80 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Gary T. Geise Date of Receipt Mailing Address 28561 Woodland Ave 30 06 2015 City Zip Code State Transaction ID: SA11AI.39515 OH Perrysburg 43551 Amount of Each Receipt this Period FEC ID number of contributing 600.00 С federal political committee. **Payroll Contribution** Name of Employer Occupation Director of Reimbursement HCR Manor Care, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 1888.85 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 12 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Lynda Gluch Date of Receipt Mailing Address 8740 Paulina Avenue 2015 06 City Zip Code State Transaction ID: SA11AI.39395 Grosse Ile MI 48138 Amount of Each Receipt this Period FEC ID number of contributing C 1800.00 federal political committee. Name of Employer Occupation **Director of Dietary Services** HCR.ManorCare. Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 1800.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Leonard Grabijas Date of Receipt Mailing Address 2682 Ravine Side North 06 30 2015 City State Zip Code Transaction ID: SA11AI.39520 MI Howell 48843 Amount of Each Receipt this Period FEC ID number of contributing 346.15 federal political committee. Payroll Contribution Name of Employer Occupation HCR Manor Care, LLC. VP Sales & Mkting Receipt For: Aggregate Year-to-Date ▼ Primary General 346.15 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. John Graham Date of Receipt Mailing Address 3000 Riva Ridge Rd 01 23 2015 City Zip Code State Transaction ID: SA11AI.39241 OH Toledo 43615 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 С federal political committee. Contribution Name of Employer Occupation HCR.ManorCare, Inc. VP Assisted Living Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) 7146.15 SUBTOTAL of Receipts This Page (optional).....

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FOR LINE NUMBER: PAGE 13 OF Use separate schedule(s) for each category of the Detailed Summary Page (check only one) X 11a 11b 11c 12 13 14 16 15

NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC		to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ruth G Graziano Mailing Address 503 Elk Mills Road		Date of Receipt
City	Chata Zin Ca-la	06 30 2015
City Oxford	State Zip Code PA 19363	Transaction ID : SA11AI.39521
FEC ID number of contributing federal political committee.	C 19303	Amount of Each Receipt this Period 350.00
Name of Employer	Occupation	Payroll Contribution
HCR ManorCare Inc.	Regional Director of Operation	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Karen Harris		Date of Receipt
Mailing Address 8250 SW 8th St		06 30 _2015 _
City	State Zip Code	06 30 2015 Transaction ID : SA11AI.39525
North Lauderdale	FL 33068	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	550.00
Name of Employer HCR ManorCare Inc.	Occupation Assistant Administrator	Payroll Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) Mr. Alan Hash		Date of Bossint
Mailing Address 9496 South Dunbar Circle		Date of Receipt 06 30 2015
City South Jordan	State Zip Code UT 84095	Transaction ID : SA11AI.39526
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1440.00
Name of Employer	Occupation	Payroll Contribution
HCR Manor Care, Inc.	Regional Director - Western Division 5	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General Other (specify) ▼	1440.00	
SUBTOTAL of Receipts This Page (optional)		2340.00

FOR LINE NUMBER: PAGE 14 OF 47 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Kevin C Henricks Date of Receipt Mailing Address 23636 W. Chicago St. Unit 102 30 2015 06 City State Zip Code Transaction ID: SA11AI.39529 Plainfield IL 60544 Amount of Each Receipt this Period FEC ID number of contributing C 369.00 federal political committee. **Payroll Contribution** Name of Employer Occupation Regional Director of Operation HCR ManorCare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 369.00 Other (specify) Full Name (Last, First, Middle Initial) B. Deborah Cox Hilgenberg Date of Receipt Mailing Address 74-062 Scholar Lane W 06 30 2015 City State Zip Code Transaction ID: SA11AI.39530 Palm Desert CA 92211 Amount of Each Receipt this Period FEC ID number of contributing 240.00 federal political committee. Payroll Contribution Name of Employer Occupation HCR ManorCare Inc. Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) c. Timothy M Hock Date of Receipt Mailing Address 8054 Tillicum Grove North 30 06 2015 City Zip Code State Transaction ID: SA11AI.39532 MI Rockford 49341 Amount of Each Receipt this Period FEC ID number of contributing 461.52 С federal political committee. **Payroll Contribution** Name of Employer Occupation Regional Director of Ops HCR ManorCare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 461.52 Other (specify) 1070.52 SUBTOTAL of Receipts This Page (optional).....

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FOR LINE NUMBER: PAGE 15 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Jason Hohlefelder Date of Receipt Mailing Address 8103 Alimoore Green 04 2015 02 City Zip Code State Transaction ID: SA11AI.39392 OH Dublin 43016 Amount of Each Receipt this Period FEC ID number of contributing C 1200.00 federal political committee. Contribution Name of Employer Occupation Regional Director of Operations HCR ManorCare Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) B. Rebecca Hollingsead Date of Receipt Mailing Address 558 N Hillcrest 30 06 2015 City State Zip Code Transaction ID: SA11AI.39538 IL Decatur 62522 Amount of Each Receipt this Period FEC ID number of contributing C 658.00 federal political committee. Payroll Contribution Name of Employer Occupation **HCR Manor Care Director Clinical Services** Receipt For: Aggregate Year-to-Date ▼ Primary General 658.00 Other (specify) Full Name (Last, First, Middle Initial) c. Sharon E Hollins Date of Receipt Mailing Address 3311 Gallatin Rd 06 22 2015 City Zip Code State Transaction ID: SA11AI.39449 OH Toledo 43606 Amount of Each Receipt this Period FEC ID number of contributing 2000.00 С federal political committee. Contribution Name of Employer Occupation Assistant General Counsel HCR ManorCare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) 3858.00 SUBTOTAL of Receipts This Page (optional).....

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Sharon E Hollins Date of Receipt Mailing Address 3311 Gallatin Rd 30 2015 06 City Zip Code State Transaction ID: SA11AI.39539 OH Toledo 43606 Amount of Each Receipt this Period FEC ID number of contributing C 923.04 federal political committee. **Payroll Contribution** Name of Employer Occupation Assistant General Counsel HCR ManorCare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 2923.04 Other (specify) Full Name (Last, First, Middle Initial) B. Lynn M Hood Date of Receipt Mailing Address 15415 Meadow Wood Dr 30 06 2015 City State Zip Code Transaction ID: SA11AI.39540 FL Wellington 33414 Amount of Each Receipt this Period FEC ID number of contributing 900.00 federal political committee. Payroll Contribution Name of Employer Occupation HCR ManorCare Inc. Asst General Mgr Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kathryn Hoops Date of Receipt Mailing Address 24708 McCutchenville Road 30 06 2015 City State Zip Code Transaction ID: SA11AI.39541 OH Perrysburg 43551 Amount of Each Receipt this Period FEC ID number of contributing 923.16 С federal political committee. **Payroll Contribution** Name of Employer Occupation VP of Tax HCR.ManorCare, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 923.16 Other (specify) 2746.20 SUBTOTAL of Receipts This Page (optional).....

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	s and Statements may not be sold or used by any per sing the name and address of any political committee	
NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC		
Full Name (Last, First, Middle Initial) Elizabeth Howard		Date of Receipt
Mailing Address 2514 Crow Valley Stre	eet	05 29 2015
City San Antonio	State Zip Code TX 78232	Transaction ID : SA11AI.39420
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer HCR Manor Care, Inc. Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Administrator Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Rebecca S Jablon Mailing Address 3349 Fairbanks Ave		Date of Receipt
City	State Zip Code	06 30 2015 Transaction ID : SA11AI.39546
TOLEDO	OH 43615	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer HCR ManorCare Inc.	Occupation Admin Dir Of Nursing Serv	Payroll Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) C. Ms Diane Johnson		Date of Receipt
Mailing Address 206 Ruth Road		06 30 2015
City Fleetwood	State Zip Code PA 19522	Transaction ID : SA11AI.39553 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	780.00
Name of Employer	Occupation	Payroll Contribution
HCR.ManorCare, Inc. Receipt For:	Regional Director of Operations	-
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	
SUBTOTAL of Receipts This Page (option	onal)	1630.00
	<u> </u>	
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FOR LINE NUMBER: PAGE 18 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Nicholas B Johnson Date of Receipt Mailing Address 3106 Ashburn Lane 30 2015 06 City Zip Code State Transaction ID: SA11AI.39554 MD Pasadena 21122 Amount of Each Receipt this Period FEC ID number of contributing C 340.00 federal political committee. **Payroll Contribution** Name of Employer Occupation Admission Director HCR Manor Care. Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 340.00 Other (specify) Full Name (Last, First, Middle Initial) B. Robert G Julius Date of Receipt Mailing Address 3321 Pelham Rd 06 30 2015 City State Zip Code Transaction ID: SA11AI.39556 Ottawa Hills OH 43606 Amount of Each Receipt this Period FEC ID number of contributing C 848.10 federal political committee. Payroll Contribution Name of Employer Occupation HCR Manor Care, Inc. Mgr. Business Office Process Dev. Receipt For: Aggregate Year-to-Date ▼ Primary General 848.10 Other (specify) Full Name (Last, First, Middle Initial) c. Elizabeth M Kaczor Date of Receipt Mailing Address 1689 Rauch Rd 30 06 2015 City State Zip Code Transaction ID: SA11AI.39557 MI Temperance 48182 Amount of Each Receipt this Period FEC ID number of contributing 480.00 С federal political committee. **Payroll Contribution** Name of Employer Occupation AVP HR Operations HCR ManorCare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) 1668.10 SUBTOTAL of Receipts This Page (optional).....

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Matthew Kang Date of Receipt Mailing Address 3214 Chapel Creek Drive 2015 29 City Zip Code State Transaction ID: SA11AI.39418 OH Perrysburg 43551 Amount of Each Receipt this Period FEC ID number of contributing C 5000.00 federal political committee. Name of Employer Occupation Vice President and CFO HCR ManorCare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Linda Karling-Lott Date of Receipt Mailing Address 4361 Conrwallis Ct 30 06 2015 City State Zip Code Transaction ID: SA11AI.39560 GA Marietta 30068 Amount of Each Receipt this Period FEC ID number of contributing C 216.00 federal political committee. Payroll Contribution Name of Employer Occupation HCR Manor Care, Inc. Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 216.00 Other (specify) Full Name (Last, First, Middle Initial) c. Rodney S Keefer Date of Receipt Mailing Address 15126 Ridgeview Dr 30 06 2015 City State Zip Code Transaction ID: SA11AI.39561 IΑ Clive 50325 Amount of Each Receipt this Period FEC ID number of contributing 245.75 С federal political committee. **Payroll Contribution** Name of Employer Occupation Administrator HCR Manor Care, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 245.75 Other (specify) 5461.75 SUBTOTAL of Receipts This Page (optional).....

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FOR LINE NUMBER: PAGE 20 OF 47 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Mark Kruzel Date of Receipt Mailing Address 26215 Black Oak Ct 30 2015 06 City Zip Code State Transaction ID: SA11AI.39570 OH Perrysburg 43551 Amount of Each Receipt this Period FEC ID number of contributing C 240.00 federal political committee. **Payroll Contribution** Name of Employer Occupation HCR ManorCare Accounting Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Elliot Lekawa Date of Receipt Mailing Address 13690 Highland Springs Ct 06 30 2015 City State Zip Code Transaction ID: SA11AI.39575 KS Wichita 67235 Amount of Each Receipt this Period FEC ID number of contributing 304.50 federal political committee. Payroll Contribution Name of Employer Occupation HCR Manor Care, LLC. **RDO** Receipt For: Aggregate Year-to-Date ▼ Primary General 304.50 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Richard Louwaert Date of Receipt Mailing Address PO Box 152 30 06 2015 City Zip Code State Transaction ID: SA11AI.39578 MI Decatur 49045 Amount of Each Receipt this Period FEC ID number of contributing 240.00 С federal political committee. **Payroll Contribution** Name of Employer Occupation Administrator HCR Manor Care, LLC. Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) 784.50 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Carrie Lund Date of Receipt Mailing Address 14802 Dunston Place 30 2015 06 City State Zip Code Transaction ID: SA11AI.39581 FL Tampa 33618 Amount of Each Receipt this Period FEC ID number of contributing C 480.00 federal political committee. **Payroll Contribution** Name of Employer Occupation Sr. Administrator - Palm Harbor HCR Manor Care. Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jill Matelan Date of Receipt Mailing Address 312 N. Franklin St 30 06 2015 City State Zip Code Transaction ID: SA11AI.39590 PA Fleetwood 19522 Amount of Each Receipt this Period FEC ID number of contributing C 356.00 federal political committee. Payroll Contribution Name of Employer Occupation HCR Manor Care, Inc. Administrator - Sinking Spring Receipt For: Aggregate Year-to-Date ▼ Primary General 356.00 Other (specify) Full Name (Last, First, Middle Initial) c. Murry Mercier Date of Receipt Mailing Address 7110 Oak Bluff Lane 30 06 2015 City State Zip Code Transaction ID: SA11AI.39592 OH Maumee 43537 Amount of Each Receipt this Period FEC ID number of contributing 1140.00 С federal political committee. **Payroll Contribution** Name of Employer Occupation VP - Information Systems HCR Manor Care, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 1140.00 Other (specify) 1976.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Daniel J Mikus Date of Receipt Mailing Address 809 Oak Avenue 30 2015 06 City State Zip Code Transaction ID: SA11AI.39594 Linwood NJ 08221 Amount of Each Receipt this Period FEC ID number of contributing C 316.03 federal political committee. **Payroll Contribution** Name of Employer Occupation Administrator HCR ManorCare Receipt For: Aggregate Year-to-Date ▼ Primary General 316.03 Other (specify) Full Name (Last, First, Middle Initial) B. Gregory E Milanich Date of Receipt Mailing Address 8442 Settlers PSGE 04 10 2015 City State Zip Code Transaction ID: SA11AI.39387 OH Brecksville 44141 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Contribution Name of Employer Occupation **HCR ManorCare AVP Pharmacy Services** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Debra Miles Date of Receipt Mailing Address 7448 Hickory Valley Drive 30 06 2015 City Zip Code State Transaction ID: SA11AI.39595 OH Maumee 43537 Amount of Each Receipt this Period FEC ID number of contributing 400.00 С federal political committee. **Payroll Contribution** Name of Employer Occupation AVP & Director of Accounting HCR ManorCare Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 966.03 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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ny information copied from such Reports a r for commercial purposes, other than using	and Statements may not be sold or used by any per g the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC		
Full Name (Last, First, Middle Initial) Scott Miller Mailing Address 198 Old Mill Drive		Date of Receipt
-		06 30 2015
City Langhorne	State Zip Code PA 19047	Transaction ID : SA11AI.39597
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 378.00
Name of Employer HCR ManorCare Inc.	Occupation Sr Administrator	Payroll Contribution
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 378.00	
Full Name (Last, First, Middle Initial) Mr. Doug Mock Mailing Address 1083 Abbieshire Ave	<u>'</u>	Date of Receipt
	7.0.1	05 06 2015
City Lakewood	State Zip Code OH 44107	Transaction ID : SA11AI.39396
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 700.00
Name of Employer HCR Manor Care, Inc.	Occupation RDO	_
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 700.00	
Full Name (Last, First, Middle Initial)		D. (D.)
Mailing Address 308 Shelly Drive		Date of Receipt 03 06 2015
City Sinking Spring	State Zip Code PA 19608	Transaction ID : SA11AI.39362
Sinking Spring FEC ID number of contributing federal political committee.	C 19608	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
HCR.ManorCare, Inc.	Regional Director of Operations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (options	al)	2078.00
OTAL This Period (last page this line num	nber only)	

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	d Statements may not be sold or used by any per the name and address of any political committee	
NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC		
Full Name (Last, First, Middle Initial) Mr. Tom Myers Mailing Address 24927 Prairie Crossing City Perrysburg FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	State Zip Code OH 43551 C Occupation Director of Ops Support - Central Aggregate Year-to-Date ▼ 275.00	Date of Receipt 06 30 2015 Transaction ID: SA11AI.39601 Amount of Each Receipt this Period 275.00 Payroll Contribution
Full Name (Last, First, Middle Initial) Ms Joylin Nation Mailing Address 15985 Voyageurs Place City West Palm Beach FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	State Zip Code FL 33414 C Occupation Senior Administrator Aggregate Year-to-Date ▼ 692.28	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Linda Neumann Mailing Address 28 Roslyn Road City Grosse Pointe Shor FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	State Zip Code MI 48236 C Occupation Regional Director of Operation Aggregate Year-to-Date ▼ 3000.00	Date of Receipt 02 19 2015 Transaction ID: SA11AI.39361 Amount of Each Receipt this Period 3000.00 Contribution
SUBTOTAL of Receipts This Page (optional)	>	3967.28
TOTAL This Period (last page this line numb	er only)	

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Ms Loretta O'Neill Date of Receipt Mailing Address 1901 Manor Ridge Drive 30 2015 06 City Zip Code State Transaction ID: SA11AI.39610 PΑ Lancaster 17603 Amount of Each Receipt this Period FEC ID number of contributing C 440.00 federal political committee. **Payroll Contribution** Name of Employer Occupation HCR Manor Care Inc. RDO - Assisted Living Division Receipt For: Aggregate Year-to-Date ▼ Primary General 440.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms Leslie Ohm Date of Receipt Mailing Address 12331 South 71st Avenue 06 30 2015 City State Zip Code Transaction ID: SA11AI.39609 Palos Heights IL 60463 Amount of Each Receipt this Period FEC ID number of contributing 497.00 federal political committee. Payroll Contribution Name of Employer Occupation HCR.ManorCare, Inc. Regional Director of Operations Receipt For: Aggregate Year-to-Date ▼ Primary General 497.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Michael Orinoco Date of Receipt Mailing Address 1361 Bobby Lane M = M 30 06 2015 City Zip Code State Transaction ID: SA11AI.39612 OH Westlake 44145 Amount of Each Receipt this Period FEC ID number of contributing 207.90 С federal political committee. **Payroll Contribution** Name of Employer Occupation Administrator HCR Manor Care, LLC. Receipt For: Aggregate Year-to-Date ▼ Primary General 207.90 Other (specify)

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1144.90

SUBTOTAL of Receipts This Page (optional).....

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Paul A. Ormond Date of Receipt Mailing Address 2420 Underhill Road 03 2015 27 City Zip Code State Transaction ID: SA11AI.39375 OH Toledo 43615 Amount of Each Receipt this Period FEC ID number of contributing C 5000.00 federal political committee. Contribution Name of Employer Occupation Chairman President/CEO HCR.ManorCare. Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. James Pagoaga Date of Receipt Mailing Address 21 Winding Creek Drive 01 29 2015 City State Zip Code Transaction ID: SA11AI.39341 OH Sylvania 43560 Amount of Each Receipt this Period FEC ID number of contributing C 3000.00 federal political committee. Contribution Name of Employer Occupation HCR.ManorCare, Inc. Vice President, Rehabilitation Receipt For: Aggregate Year-to-Date ▼ Primary General 3000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Nadja Papillon Date of Receipt Mailing Address 5044 NW 90th Terrace 30 06 2015 City State Zip Code Transaction ID: SA11AI.39614 FL **Coral Springs** 33067 Amount of Each Receipt this Period FEC ID number of contributing 260.00 С federal political committee. **Payroll Contribution** Name of Employer Occupation Administrator HCR ManorCare Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) 8260.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Mr. David Parker Date of Receipt Mailing Address 2154 Tremont Road 30 2015 06 City Zip Code State Transaction ID: SA11AI.39615 OH Columbus 43212 Amount of Each Receipt this Period FEC ID number of contributing C 700.00 federal political committee. **Payroll Contribution** Name of Employer Occupation VP Assistant General Manager HCR.ManorCare. Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) B. Richard A Parr II Date of Receipt Mailing Address 2253 Gray Fox Court 06 30 2015 City State Zip Code Transaction ID: SA11AI.39616 MI Ann Arbor 48103 Amount of Each Receipt this Period FEC ID number of contributing 1346.10 federal political committee. Payroll Contribution Name of Employer Occupation HCR Manor Care, Inc. VP - General Counsel & Secretary Receipt For: Aggregate Year-to-Date ▼ Primary General 1346.10 Other (specify) Full Name (Last, First, Middle Initial) c. Brian W Perry Date of Receipt Mailing Address 3 Exmoor 30 06 2015 City Zip Code State Transaction ID: SA11AI.39617 OH Toledo 43615 Amount of Each Receipt this Period FEC ID number of contributing 600.00 С federal political committee. **Payroll Contribution** Name of Employer Occupation **AVP-Government Relations** HCR ManorCare Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 2646.10 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Mrs. Mary T. Reagan Date of Receipt Mailing Address 925 Main Street 30 2015 06 City Zip Code State Transaction ID: SA11AI.39621 PΑ Bethlehem 18018 Amount of Each Receipt this Period FEC ID number of contributing C 260.00 federal political committee. **Payroll Contribution** Name of Employer Occupation Administrator - Easton HCR Manor Care. Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) Full Name (Last, First, Middle Initial) B. Barbara Reigel Date of Receipt Mailing Address 112 Center Street 06 30 2015 City State Zip Code Transaction ID: SA11AI.39622 PA Bridgeport 19405 Amount of Each Receipt this Period FEC ID number of contributing 444.00 federal political committee. Payroll Contribution Name of Employer Occupation HCR Manor Care, Inc. Mobile ADNS Receipt For: Aggregate Year-to-Date ▼ Primary General 444.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Patricia B Richards Date of Receipt Mailing Address P.O. Box 754 30 06 2015 City Zip Code State Transaction ID: SA11AI.39623 WV **Shady Spring** 25918 Amount of Each Receipt this Period FEC ID number of contributing 212.28 С federal political committee. **Payroll Contribution** Name of Employer Occupation HCR Manor Care, Inc. Area Human Resource Director Receipt For: Aggregate Year-to-Date ▼ Primary General 212.28 Other (specify) 916.28 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC		
Full Name (Last, First, Middle Initial) A. Damian M Rodgers Mailing Address 4647 Calico Court City	State Zip Code	Date of Receipt 06 30 2015 Transaction ID : SA11Al.39626
Monclova FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: □ Primary □ General □ Other (specify) ▼	OH 43542 C Occupation Legal Counsel Aggregate Year-to-Date ▼ 360.00	Amount of Each Receipt this Period 360.00 Payroll Contribution
Full Name (Last, First, Middle Initial) David R Roth Mailing Address 5257 Bentwood Drive City Mason FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary Other (specify)	State Zip Code OH 45040 C Occupation Director Of Planning Aggregate Year-to-Date ▼ 563.05	Date of Receipt M M M / 30 2015 Transaction ID: SA11AI.39627 Amount of Each Receipt this Period 563.05 Payroll Contribution
Full Name (Last, First, Middle Initial) Mr. Rick Rump Mailing Address 2423 Heather Glen City Maumee FEC ID number of contributing federal political committee. Name of Employer HCR.ManorCare, Inc. Receipt For: Primary General Other (specify)	State Zip Code OH 43537 C Occupation Director of Corporate Communications Aggregate Year-to-Date ▼ 713.24	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	>	1636.29
TOTAL This Period (last page this line numbe	r only)	

FOR LINE NUMBER: PAGE 30 OF 47 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Mary Jane Ruppert Date of Receipt Mailing Address 603 North Blackhoof St. 30 2015 06 City Zip Code State Transaction ID: SA11AI.39631 OH Wapakoneta 45895 Amount of Each Receipt this Period FEC ID number of contributing C 592.24 federal political committee. **Payroll Contribution** Name of Employer Occupation Sr Dir 4H Compliance and Edu HCR ManorCare Receipt For: Aggregate Year-to-Date ▼ Primary General 592.24 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Edward Schuch Date of Receipt Mailing Address 304 Adriana Court 06 30 2015 City State Zip Code Transaction ID: SA11AI.39633 PA Northhampton 18067 Amount of Each Receipt this Period FEC ID number of contributing 308.00 federal political committee. Payroll Contribution Name of Employer Occupation HCR Manor Care, Inc. Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 308.00 Other (specify) Full Name (Last, First, Middle Initial) c. Laura M Stengel Date of Receipt Mailing Address 24228 East Arapahoe Place M = M 30 06 2015 City Zip Code State Transaction ID: SA11AI.39644 CO Aurora 80016 Amount of Each Receipt this Period FEC ID number of contributing 313.68 С federal political committee. **Payroll Contribution** Name of Employer Occupation Administrator HCR Manor Care, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 313.68 Other (specify) 1213.92 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	d Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC		
Full Name (Last, First, Middle Initial) Colette Storck Mailing Address 28490 Wynikako Ave		Date of Receipt
City	State Zip Code	06 30 2015 Transaction ID : SA11AI.39645
Millsboro	DE 19966	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	222.11
Name of Employer HCR Manor Care, LLC.	Occupation Administrator	Payroll Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 222.11	
Full Name (Last, First, Middle Initial) Laurie C StPierre Mailing Address 2402 Address		Date of Receipt
Mailing Address 2120 Addison	Ctata 7:n Code	06 30 2015
City Clermont	State Zip Code FL 34711	Transaction ID : SA11AI.39646 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	398.07
Name of Employer HCR Manor Care, Inc.	Occupation Director Case Management	Payroll Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 398.07	
Full Name (Last, First, Middle Initial) C. Ms. Victoria Strom		Date of Receipt
Mailing Address 2067 Centerville Rd		05 06 2015
City Victoria	State Zip Code IL 61485	Transaction ID : SA11AI.39407 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
HCR.ManorCare, Inc. Receipt For:	MMD	-
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		870.18
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NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC		
Full Name (Last, First, Middle Initial) Mr. Adam Swartz Mailing Address 5715 Isch Rd		Date of Receipt
City Wallbridge FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, LLC. Receipt For: □ Primary □ General □ Other (specify) ▼	State Zip Code OH 43465 C Occupation DDOS Aggregate Year-to-Date ▼ 250.00	Transaction ID: SA11AI.39383 Amount of Each Receipt this Period 250.00 Contribution
Full Name (Last, First, Middle Initial) Mr. Eric Talbert Mailing Address 7231 Stonewater Ct City Maumee FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	State Zip Code OH 43537 C Occupation Div. Director of Operations Support Aggregate Year-to-Date ▼ 550.00	Date of Receipt M M M / D J J J J J J J J J J J J J J J J J J
Full Name (Last, First, Middle Initial) Rami Ubaydi Mailing Address 6519 Chatham Circle City Rochester Hills FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	State Zip Code MI 48306 C Occupation Regional Director of Operations Aggregate Year-to-Date ▼ 834.68	Date of Receipt M M M / D D / 2015 Transaction ID : SA11AI.39653 Amount of Each Receipt this Period 834.68 Payroll Contribution
SUBTOTAL of Receipts This Page (optional)		1634.68
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 33 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

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Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Joseph Wilson Date of Receipt Mailing Address 7720 Sagamore Hills Blvd 2015 29 City Zip Code State Transaction ID: SA11AI.39419 OH Sagamore Hills 44067 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation HCR Manor Care, Inc. Administrator - Mayfield Heights Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** CYNTHIA WINIARSKI Date of Receipt Mailing Address 3241 Rockcress Ct 04 10 2015 City State Zip Code Transaction ID: SA11AI.39384 MI Ann Arbor, 48103 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Contribution Name of Employer Occupation **HCR ManorCare** IS Manager, Data Services Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Benjuiman Young Date of Receipt Mailing Address 7822 NE 24th Ct. 30 06 2015 City Zip Code State Transaction ID: SA11AI.39658 WA Vancouver 98665 Amount of Each Receipt this Period FEC ID number of contributing 299.16 С federal political committee. **Payroll Contribution** Name of Employer Occupation HCR ManorCare Administrator Receipt For:

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SUBTOTAL of Receipts This Page (optional)	I.			7		_	7	_	10	49.1	6	
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Aggregate Year-to-Date ▼

Primary

Other (specify)

General

FOR LINE NUMBER: PAGE 34 OF 47 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC Full Name (Last, First, Middle Initial) Cynthia M Zalewski Date of Receipt Mailing Address 3845 Drummond Rd 30 2015 06 City Zip Code State Transaction ID: SA11AI.39662 OH Toledo 43613 Amount of Each Receipt this Period FEC ID number of contributing C 346.20 federal political committee. **Payroll Contribution** Name of Employer Occupation HCR ManorCare Inc. Senior Attorney Receipt For: Aggregate Year-to-Date ▼ Primary General 346.20 Other (specify) Full Name (Last, First, Middle Initial) **B.** Patricia J Zurick Date of Receipt Mailing Address 807 Johnston Drive 03 06 2015 City State Zip Code Transaction ID: SA11AI.39363 Bethlehem PA 18017 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Contribution Name of Employer Occupation HCR ManorCare Administrative Director of Nursing Srv Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 596.20 SUBTOTAL of Receipts This Page (optional)..... 65931.28 TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X))		FOR LINE NUMBER: PAGE 35 OF 47				
ITEMIZED RECEIPTS	•	Use separate schedule(s) for each category of the	(check only one)				
TIEMIZED NECEIF 13		Detailed Summary Page	11a 11b 11c 12				
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Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC							
<u>/</u>							
Full Name (Last, First, Middle Initial) A. CANTOR FOR CONGRESS			Date of Receipt				
Mailing Address P. O. Box 17813			06 22 2015				
City	State	Zip Code	Transaction ID : SA16.39448				
Richmond	VA	23226	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C co	0355461	966.50				
Name of Employer	Occupation	<u> </u>	Contribution Refund				
Receipt For:	Aggregate	Year-to-Date ▼					
Primary General Other (specify) ▼		966.50]				
Full Name (Last, First, Middle Initial) B. FRIENDS FOR HARRY REID			Date of Receipt				
Mailing Address P.O. BOX 19163			06 12 2015				
City	State	Zip Code	Transaction ID : SA16.39440				
LAS VEGAS	NV	89132	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C cod	0204370	5000.00				
Name of Employer	Occupation						
Receipt For: 2016	Aggregate	Year-to-Date ▼					
Primary General	Aggregate	Teal-10-Date ▼	1				
Other (specify) ▼	L	5000.00					
Full Name (Last, First, Middle Initial) C.	'		Date of Receipt				
Mailing Address			M = M / D = D / Y = Y = Y				
City	State	Zip Code	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С						
Name of Employer	Occupation						
Receipt For:	Aggregate	Year-to-Date ▼					
Primary General	Aggregate	Total to Duto ¥	1				
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: P.	AGE 36 OF 47
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or for commercial purposes, other than using the name	ne and address of any polit	ical committee to	solicit contributions from su	uch committee.
NAME OF COMMITTEE (In Full)				
HCR MANOR CARE PAC				
/				
Full Name (Last, First, Middle Initial)				
1. The Huntington National Bank			Date of Disbursement	
M ''' A LL			M M / D D /	Y Y Y Y
Mailing Address P.O. Box 5065			01 08	2015
City	State Zip Code			
Cleveland	OH 44101-0065		Transaction ID : SB21E	3.39666
Purpose of Disbursement	44101-0003			
Talpood of Biobardonicin			Amount of Each Disburse	ement this Period
Candidate Name			7 61. 246.1. 2166.416	
		Category/ Type		-15.00
Office Sought: House Disbursen	nent For:	Туре		
	Primary General			
President	Other (specify)			
State: District:	Other (specify)			
2				
Full Name (Last, First, Middle Initial)			Data of Diaburaament	
3. The Huntington National Bank			Date of Disbursement	
Mailing Address B.O. Bay 5005			M = M / D = D /	2015
Mailing Address P.O. Box 5065			02 03	2015
City	State Zip Code			
Cleveland	OH 44101-0065		Transaction ID : SB21I	B.39667
Purpose of Disbursement				
			Amount of Each Disburs	ement this Period
Candidate Name		Category/		
		Type		5.00
Office Sought: House Disbursen	nent For:			
Senate	Primary General			
	Other (specify) ▼			
State: District:	(1			
Full Name (Last, First, Middle Initial)				
C.			Date of Disbursement	
			M M / D D /	Y Y Y Y
Mailing Address			W = W / D = D /	
3				
City	State Zip Code			
	•			
Purpose of Disbursement				
		Amount of Each Disburs	ement this Period	
Candidate Name		Category/		
		Type		
Office Sought: House Disbursen	nent For:			
Senate	Primary General			
	Other (specify) ▼			
State: District:	· · · · · · · · · · · · · · · · · · ·			
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	y information copied from such Reports and Staten for commercial purposes, other than using the nam			
\rangle	NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC			
	Full Name (Last, First, Middle Initial)			Data of Birkon and
Α.	BECERRA FOR CONGRESS			Date of Disbursement
	Mailing Address P.O. Box 261060			03 12 2015
	,	State Zip Code		Transaction ID : SB23,39371
	Los Angeles Purpose of Disbursement	CA 90026		
				Amount of Each Disbursement this Period
	Candidate Name		Category/ Type	1000.00
	Senate President	nent For: 2016 Primary General Other (specify) ▼	,,	
	State: District:			
В.	Full Name (Last, First, Middle Initial) BLUEGRASS COMMITTEE			Date of Disbursement
	Mailing Address 220 1/2 E ST., NE	ST., NE		03 12 2015
	WASHINGTON	State Zip Code DC 20002		Transaction ID : SB23.39366
	Purpose of Disbursement Contribution			Amount of Each Disbursement this Period
	Candidate Name		Category/ Type	2500.00
		nent For: 2016 Primary General Other (specify)		
c.	Full Name (Last, First, Middle Initial) BOEHNER FOR SPEAKER			Date of Disbursement
	Mailing Address 320 FIRST ST. SE			01 15 2015
	,	State Zip Code DC 20003		Transaction ID : SB23.39159
	Purpose of Disbursement Contribution			
	Candidate Name		Category/ Type	Amount of Each Disbursement this Period 5000.00
	Office Sought: House Senate President Disbursen	nent For: 2016 Primary General Other (specify)	.,,,,,	
	State: District:			

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 38 OF 47
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	NOMBELL.
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NAME OF COMMITTEE (In Full)			
│ HCR MANOR CARE PAC			
Full Name (Last, First, Middle Initial)			
A. BOEHNER FOR SPEAKER			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address 320 FIRST ST. SE			03 19 2015
City	State Zip Code		
WASHINGTON	State Zip Code DC 20003		Transaction ID: SB23.39374
Purpose of Disbursement	2000		
Contribution			Amount of Each Disbursement this Period
Candidate Name		Category/	5000.00
		Type	5000.00
	ment For: 2016		
Senate President	Primary		
State: District:	Carol (opoony)		
Full Name (Last, First, Middle Initial)			
B. Brady for Congress			Date of Disbursement
			M - M / D - D / Y - Y - Y
Mailing Address PO Box 708			01 15 2015
City	State 7in Code		
City Bloomington	State Zip Code IL 61702		Transaction ID : SB23.39160
Purpose of Disbursement	302		
Contribution		,	Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
Office Cought.	mant Fam. 5555	Type	2300.00
Office Sought: House Disburse Senate	ment For: 2016 Primary General		
President	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial)			
C. DEMOCRATIC SENATORIAL CA	MPAIGN COMMITTI	EE	Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address 120 MARYLAND AVENUE NE			02 25 2015
City	State Zip Code		
WASHINGTON	DC 20002		Transaction ID : SB23.39354
Purpose of Disbursement			
Contribtuion			Amount of Each Disbursement this Period
Candidate Name		Category/	5000.00
Office Sought: House Disburse	ement For: 2016	Туре	555.55
Senate	Primary General		
President	Other (specify)		
State: District:	· · · · · · · · · · · · · · · · · · ·		
SUBTOTAL of Disbursements This Page (optional).			12500.00
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SCHEDULE B (FEC Form 3X)	Lieu agravata agla dula(a)	FOR LINE I		PAGE 39 OF 47
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	Detailed Summary Page	21b 27	22 X 23 28b	24 25 26 28c 29 30b
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NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC				
Full Name (Last, First, Middle Initial)				
A. Friends of Joe Pitts			Date of Disburseme	nt
Mailing Address PO Box 775			02 25	2015
City	State Zip Code		: ID 0	Doc 20055
Unionville	PA 19375		Transaction ID : S	B23.39355
Purpose of Disbursement Contribution			Amount of Each Dis	bursement this Period
Candidate Name		Category/ Type		1000.00
Senate President	ment For: 2016 Primary General Other (specify)			
State: PA District: 16				
Full Name (Last, First, Middle Initial) B. FRIENDS OF JOHN THUNE			Date of Disburseme	nt
			M = M / D = D	/ Y Y Y Y Y
Mailing Address PO BOX 841			02 25	2015
City SIOUX FALLS	State Zip Code SD 57101		Transaction ID : S	B23.39356
Purpose of Disbursement Contribution	07.101			
Candidate Name			Amount of Each Dis	bursement this Period
		Category/ Type		1500.00
X Senate	ment For: 2016 Primary General			
State: SD District: 00	Other (specify) ▼			
Full Name (Last, First, Middle Initial) C. FRIENDS OF SCHUMER			Date of Disburseme	nt
of Intends of Schower			M M / D D	/ Y Y Y Y
Mailing Address 192 LEXINGTON AVENUE SUITE	1001		02 06	2015
City	State Zip Code		Transaction ID : S	B23.39346
NEW YORK Purpose of Disbursement	NY 10016			
Contribution			Amount of Each Dis	bursement this Period
Candidate Name		Category/ Type		1000.00
X Senate	ment For: 2016 Primary General			
State: NY District: 00	Other (specify) ▼			
				3500.00
SUBTOTAL of Disbursements This Page (optional).		<u> </u>		3000.00
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or	for commercial purposes, other than using the name	e and address of any	politica	I committee to	solicit contribution	ns from such committee.
	NAME OF COMMITTEE (In Full)					
]/	HCR MANOR CARE PAC					
_	Full Name (Last, First, Middle Initial)					
Α.	FRIENDS OF SCHUMER				Date of Disbur	sement
					M M / D	D / Y Y Y Y
	Mailing Address 192 LEXINGTON AVENUE SUITE	1001			06	22 2015
	City	State Zin Code				
	City S NEW YORK	State Zip Code NY 10016			Transaction I	D : SB23.39446
	Purpose of Disbursement	10010	т.			
					Amount of Eac	h Disbursement this Period
	Candidate Name			Category/		500.00
				Туре		500.00
		nent For: 2016				
	Senate President	Primary Gen	eral			
	State: NY District: 00	Other (specify) ▼				
_	Full Name (Last, First, Middle Initial)					
В.	LEGPAC				Date of Disburs	sement
					M M / D	D / Y Y Y Y Y
	Mailing Address 38 IVY ST., SE				03	12 2015
	-					
	City S WASHINGTON	State Zip Code DC 20003			Transaction	D : SB23.39369
	Purpose of Disbursement	20003				
	Contribution				Amount of Eac	h Disbursement this Period
	Candidate Name			Category/		4000.00
				Type		1000.00
		nent For: 2016				
		Other (anality) Gene	eral			
	State: District:	Other (specify) ▼				
_	Full Name (Last, First, Middle Initial)					
C.	MCCARTHY VICTORY FUND 201	4			Date of Disburs	sement
		•			M M / D	D / Y Y Y Y
	Mailing Address PO BOX 30844				05	19 2015
	City	7:- 0				
	•	State Zip Code MD 20824			Transaction I	D : SB23.39417
	Purpose of Disbursement					
	Contribution				Amount of Eac	h Disbursement this Period
	Candidate Name			Category/		10000.00
	000			Type		10000.00
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	State: CA District: 23	Callet (opcolity)				
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 41 OF 47
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	Detailed Summary	Page 210	22 X 23 24 25 26
		27	28a 28b 28c 29 30b
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NAME OF COMMITTEE (In Full)			
HCR MANOR CARE PAC			
Full Name (Last, First, Middle Initial)			
A. MCCASKILL FOR MISSOURI			Date of Disbursement
Mailing Address PO BOX 300077			01 29 2015
City	State Zip Code	Э	Transaction ID ODGG 000F0
ST LOUIS	MO 63130		Transaction ID : SB23.39250
Purpose of Disbursement Contribution			Amount of Each Disbursement this Period
Candidate Name		Category/	
		Type	1000.00
	ment For: 2018		
Senate President	Primary Ger Other (specify)	neral	
State: MO District: 00	Other (specify)		
Full Name (Last, First, Middle Initial)			
B. MCMORRIS RODGERS AMERIC	AN DREAM PR	OJECT: THE	Date of Disbursement
		,	M = M / D = D / Y = Y = Y
Mailing Address PO BOX 2485			06 23 2015
City	State Zip Code	Э	Transaction ID : SB23.39445
SPRINGFIELD Purpose of Disbursement	VA 22152		
SPRINGFIELD Purpose of Disbursement Contribution	VA 22152		Amount of Each Disbursement this Period
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Purpose of Disbursement Contribution	VA 22152	Category/ Type	Amount of Each Disbursement this Period
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Purpose of Disbursement Contribution Candidate Name Office Sought: House Senate Disburse	ment For: 2016		
Purpose of Disbursement Contribution Candidate Name Office Sought: House Senate President President	ment For: 2016	Туре	
Purpose of Disbursement Contribution Candidate Name Office Sought: House Senate President State: WA District: 05	ment For: 2016	Туре	
Purpose of Disbursement Contribution Candidate Name Office Sought: House Senate President State: WA District: 05 Full Name (Last, First, Middle Initial)	ment For: 2016 Primary Ger Other (specify) ▼	Type	
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Purpose of Disbursement Contribution Candidate Name Office Sought: House Senate President State: WA District: 05 Full Name (Last, First, Middle Initial) C. NATIONAL REPUBLICAN SENAT Mailing Address 425 SECOND STREET NE City WASHINGTON Purpose of Disbursement	ment For: 2016 Primary Ger Other (specify)	Type neral	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Purpose of Disbursement Contribution Candidate Name Office Sought: House Senate President State: WA District: 05 Full Name (Last, First, Middle Initial) C. NATIONAL REPUBLICAN SENAT Mailing Address 425 SECOND STREET NE City WASHINGTON Purpose of Disbursement Contribution	ment For: 2016 Primary Ger Other (specify)	Type neral	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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Purpose of Disbursement Contribution Candidate Name Office Sought: House Senate President State: WA District: 05 Full Name (Last, First, Middle Initial) C. NATIONAL REPUBLICAN SENAT Mailing Address 425 SECOND STREET NE City WASHINGTON Purpose of Disbursement Contribution Candidate Name	ment For: 2016 Primary Ger Other (specify)	Type neral	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s	FOR LINE (check only		PAGE 42 OF 47
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	Officer offing	22 X 23 28b	24 25 2 28c 29 3
Any information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC	The second of any point	22		222
Full Name (Last, First, Middle Initial) A. ORRINPAC			Date of Disburseme	ent
Mailing Address 175 S. WEST TEMPLE, SUITE 650			01 / D D D 16	2015
SALT LAKE CITY	State Zip Code UT 84101		Transaction ID : S	B23.39162
Purpose of Disbursement Contribution			Amount of Each Dis	sbursement this Period
Candidate Name		Category/ Type	,	5000.00
Senate President	nent For: 2016 Primary General Other (specify)			
State: District: Full Name (Last, First, Middle Initial)				
B. PIONEER PAC			Date of Disburseme	ent
Mailing Address 10 WEST BROADWAY SUITE 500)		02 06	2015
SALT LAKE CITY	State Zip Code UT 84101		Transaction ID : S	BB23.39345
Purpose of Disbursement Contribution Candidate Name			Amount of Each Dis	sbursement this Period
		Category/ Type		1000.00
Senate X I	nent For: 2016 Primary General Other (specify)			
Full Name (Last, First, Middle Initial) C. RYAN FOR CONGRESS, INC.			Date of Disburseme	
Mailing Address PO BOX 1488			02 / 06	2015
•	State Zip Code WI 53547		Transaction ID : S	B23.39342
Contribution Candidate Name		Category/	Amount of Each Dis	sbursement this Period
Senate X	nent For: 2018 Primary General Other (specify)	Type	, ,	10000.00
SUBTOTAL of Disbursements This Page (optional)				16000.00
TOTAL This Period (last page this line number only)				

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 43 OF 47
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	NOMDEIT.
	for each category of the Detailed Summary Page	21b	22 🗙 23 🔲 24 🔲 25 🖂 26
	_ cance canning i ago	27	28a 28b 28c 29 30
Any information copied from such Reports and Statem			
or for commercial purposes, other than using the name	ie and address of any politic	al committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
HCR MANOR CARE PAC			
Full Name (Last, First, Middle Initial)			
A. SEARCHLIGHT LEADERSHIP FU	ND		Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address 700 13TH STREET NW			05 08 2015
SUITE 600	State Zip Code		
WASHINGTON	DC 20005		Transaction ID : SB23.39410
Purpose of Disbursement			
Contribution		L II	Amount of Each Disbursement this Period
Candidate Name		Category/	5000.00
Office Sought: House Disbursen	aont Fore Code	Туре	3000.00
	nent For: 2016 Primary General		
President	Other (specify)		
State: District:	• · · · · · · · · · · · · · · · · · · ·		
Full Name (Last, First, Middle Initial)			
3. TIBERI FOR CONGRESS			Date of Disbursement
			M = M / D = D / Y = Y = Y
Mailing Address 2931 E DUBLIN GRANVILLE ROA SUITE 190			06 02 2015
,	State Zip Code OH 43231		Transaction ID : SB23.39429
COLUMBUS Purpose of Disbursement	OH 43231		
			Amount of Each Disbursement this Period
Candidate Name		Category/	0500.00
		Type	2500.00
	nent For: 2016		
	Primary General		
State: OH District: 12	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
C.			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address			
City	State Zip Code		
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Purpose of Disbursement			
Candidate Name		0.1	Amount of Each Disbursement this Period
		Category/ Type	
Office Sought: House Disbursen	nent For:		
Senate	Primary General		
	Other (specify) ▼		
State: District:			
OUDTOTAL of Disk			7500.00
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TOTAL This Period (last page this line number only)			64000.00

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	-	R LINE NUMBER: PAGE		
ITEMIZED DISBURSEMENTS	for each category of the	(check only 21b		25	
	Detailed Summary Page	27	28a 28b 28c 🗙	29 30	
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NAME OF COMMITTEE (In Full)	e and address of any pointed	1 committee to	Solicit Contributions from Such Con	ininitioo.	
HCR MANOR CARE PAC					
Full Name (Last, First, Middle Initial)	_		Data of Bishamanan		
A. CITIZENS FOR PATRICK BROWN	E		Date of Disbursement	V	
Mailing Address 1111 N 11TH STREET			04 24 201		
•	tate Zip Code		Transaction ID : SB29.39391		
WHITEHALL Purpose of Disbursement	PA 18052				
·			Amount of Each Disbursement t	this Period	
Candidate Name		Category/ Type		2500.00	
Office Sought: House Disbursem	nent For:	71	, ,		
	Primary General				
State: District:	Other (specify) ▼				
Full Name (Last, First, Middle Initial)					
B. Citizens for Sears			Date of Disbursement	Y	
Mailing Address 6711 Monroe Street Bldg 3 Suite D			05 19 20		
,	itate Zip Code OH 43560		Transaction ID : SB29.39414		
Purpose of Disbursement Contribution			Amount of Each Disbursement t	this Period	
Candidate Name		Category/ Type		3000.00	
Senate X F	ent For: 2016 Primary General Other (specify)				
Full Name (Last, First, Middle Initial)					
C. Committee to Elect Joe Emrick			Date of Disbursement		
Mailing Address PO Box 121			05 05 201		
,	tate Zip Code PA 18372		Transaction ID : SB29.39394		
Purpose of Disbursement					
Contribution Candidate Name		Category/ Type	Amount of Each Disbursement t	this Period 500.00	
Senate X F	nent For: 2016 Primary General Other (specify)	Туре			
State. Biotriot.					
SUBTOTAL of Disbursements This Page (optional)		·····		6000.00	
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ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(official offiny	
	Detailed Summary Page	21b 27	22 23 24 25 28c X 29
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NAME OF COMMITTEE (In Full) HCR MANOR CARE PAC			
Full Name (Last, First, Middle Initial)			Date of Diri
A. FRIENDS OF ELENI			Date of Disbursement
Mailing Address 534 COURT STREET			05 08 2015
City	State Zip Code		Transaction ID : SB29.39412
READING Purpose of Disbursement	PA 19601		1
·			Amount of Each Disbursement this Perio
Candidate Name		Category/ Type	250.00
Senate President	sement For: Primary General Other (specify) ▼		
State: District:	<u> </u>		
Full Name (Last, First, Middle Initial)			Det at Diri
B. Friends of Joseph Scarnati			Date of Disbursement
Mailing Address PO Box 177			02 / 25 / 2015
City Brockway	State Zip Code PA 15824		Transaction ID : SB29.39353
Purpose of Disbursement Contribution		· · · ·	Amount of Each Disbursement this Perio
Candidate Name		Category/ Type	2500.00
	sement For: 2016 ✓ Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) C. Friends of Tom Patton			Date of Disbursement
Mailing Address 17157 Rabbit Run Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	State		
City Strongsville Purpose of Disbursement	State Zip Code OH 44136		Transaction ID : SB29.39431
Candidate Name		Category/	Amount of Each Disbursement this Perio
Office Sought: House Disbur	sement For: 2016 ✓ Primary General Other (specify) ▼	Туре	
	<u> </u>		3750.00
SUBTOTAL of Disbursements This Page (optional	······································	<u> </u>	3730.00
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SCHEDULE B (FEC Form 3X)						OR LINE NUMBER: PAGE 46 OF 47							
ITEMIZED DISBURSEMENTS		Use sepa				NUMBER: PAGE 40 OF 47 y one)							
		for each Detailed	` 21b								25	26	
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or for commercial purposes, other than usi	ng the nam	ne and addr	ess of any politi	cal con	nmitte	e to :	solicit co	ontrib	utions	from s	uch com	ımittee) .
NAME OF COMMITTEE (In Full)													
$ \hspace{.06cm} \rangle$ HCR MANOR CARE PAC													
Full Name (Last, First, Middle Initial)													
A. Jay Costa for State Senate							Date o	of Dis	sburse	ment			
							M II N	1 /	D	D /	YY	YY	7
Mailing Address 314 Newport Road							06		2	2	201	5	
City		State	Zip Code										
Pittsburgh	`	PA	15221				Tran	sacti	ion ID	: SB29.	.39442		
Purpose of Disbursement					_	_							
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Office Sought: House	Diehureen	nent For: 2	2016	T	уре	\dashv		_	7	7			
Senate		Primary	General										
President		Other (spec	cify) 🔻										
State: District:													
Full Name (Last, First, Middle Initial)													
B. Matt Smith for Judge							Date o	of Dis	sburse	ment			
Mailing Address P.O. Box 1192							03	/		D / 9	Y Y 201	YYY	7
Mailing Address P.O. Box 1192							03			9	201	5	-
City		State	Zip Code				Tran	sacti	ion ID	: SB29	30373		
Camp Hill		PA	17001				IIaii	Saci	טוו ווט	. 3023	.53575		
Purpose of Disbursement Contribution						11	Δmour	nt of	Fach	Diehure	ement t	hie Pe	riod
Candidate Name				0-4	/	4	Airiodi	. 01	Luon	Diobaro	omont t	1110 1 0	, nou
					egory/ ype				,			500.0)0
Office Sought: House	Disbursen	nent For:	l										
Senate		Primary	General										
President State: District:		Other (spec	cify) 🔻										
State: District: Full Name (Last, First, Middle Initial)													
C. MIKE TURZAI LEADERSH	ID FI INI	D					Date o	of Dis	sburse	ment			
WINCE TORZALELABEROTT	11 1 014						M N	/	D	D /	Y	YY	7
Mailing Address PO BOX 721							06		0:	2	201		
011		<u> </u>											
City WEXFORD		State PA	Zip Code 15090-0721				Tran	sacti	ion ID	: SB29	.39436		
Purpose of Disbursement				-	-								
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President		Other (spec											
State: District:		(-1	** *										
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	Detailed Summary Page	21b 27	22 23 24 25 26 26 28c X 29 30								
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NAME OF COMMITTEE (In Full)	, F										
HCR MANOR CARE PAC											
Full Name (Last, First, Middle Initial)			Data of Bisham								
Morrisey for West Virginia			Date of Disbursement								
Mailing Address PO Box 820			02 25 2015								
,	State Zip Code		Transaction ID : SB29.39359								
Charles Town	WV 25414		11411340ti011 ID . 0D23.33333								
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Candidate Name		Category/ Type	1000.00								
Office Sought: House Disburser	ment For:	.,,,,									
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President Pictrick	Other (specify) ▼										
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Mailing Address PO Box 413			06 02 2015								
,	State Zip Code		Transaction ID : SB29.39439								
Harrisburg Purpose of Disbursement	PA 17108										
i dipose of Disbursement			Amount of Each Disbursement this Period								
Candidate Name		Category/									
		Type	2500.00								
Office Sought: House Disburser											
Senate	Primary General										
President State: District:	Other (specify) ▼										
Full Name (Last, First, Middle Initial)											
			Date of Disbursement								
Mailing Address			M M / D D / Y Y Y Y								
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Candidate Name		Category/ Type									
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Office Sought: House Disburser	Distriction Occurred										
Office Sought: House Disburser Senate	Primary General										
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